

Frequently asked questions

26 May 2014

Scope of practice registration standard and guidelines

Revised Scope of practice registration standard and guidelines take effect on 30 June 2014

This FAQ is to help dental practitioners understand what they need to do to comply with the revised <u>Scope of practice registration standard</u> (registration standard) and new <u>Guidelines - Scope of practice registration</u> <u>standard</u> (guidelines).

We will update the FAQ as needed to answer questions about emerging issues.

1. What must you as a dental practitioner do?

Dental practitioners should read the standard and guidelines published on the Board's website.

2. What does the Board require of dental practitioners?

All dental practitioners are members of the dental team who exercise autonomous decision making within their particular areas of education, training and competence, to provide the best possible care for their patients. The standard provides details on which dental practitioners practice as independent practitioners. You must only perform dental treatment:

- for which you have been educated and trained in programs of study approved by the National Board, and
- in which you are competent.

You are responsible for the decisions, treatment and advice that you provide.

You as a dental practitioner must not direct any person whether a registered dental practitioner or not to undertake dental treatment or give advice outside that person's education and competence.

3. When do the registration standard and guidelines come into effect?

Both documents come into effect on 30 June 2014. The revised registration standard will replace the registration standard which commenced on 1 July 2010. The Board is publishing them early to allow dental practitioners to familiarise themselves with requirements.

4. How to the guidelines differ from the standard?

The standard sets out the requirements for all dental practitioners. The guidelines are new and are intended to assist dental practitioners understand and meet the requirements of the standard. The guidelines provide clarity on:

- the practice of dentistry including a definition of dentistry
- the scope of practice for each dental division
- · education and training, and
- the team approach to dental practice

5. What are the key changes in the registration standard?

The key changes made to the registration standard are summarised below. <u>Attachment A</u> at the end of this document shows the changes which have been made from the previous standard.

Supporting the team approach to dental care

The Board has included the requirement for a team approach to dental care in the standard to facilitate access to timely and appropriate dental treatment for the most appropriate dental practitioner educated and competent to provide the care.

Removal of supervision requirements in the registration standard for dental hygienists, dental therapists and oral health therapists in recognition of the team approach and a structured professional relationship

By recognising the strengths of the team approach, the Board has removed the term 'supervision' from the registration standard and has included a definition of a structured professional relationship.

The Board has done this to remove the ambiguity around professional accountability and responsibility for patient care that arose through different understanding of the supervision requirements for dental hygienists, dental therapists and oral health therapists.

6. Can there still be a requirement for dental practitioners to work under supervision?

Yes, there may be times when some dental practitioners may need or wish to work under supervision. A dental practitioners training and competence may require supervision of some procedures. Dental practitioners may also work under supervision as a requirement of employer or workplace agreements or personal preference.

Dental practitioners with limited registration or conditions or undertakings related to their registration or returning to practice after a prolonged absence may be required by the Board to work under supervision.

7. Are there other regulatory requirements for supervision?

Dental practitioners should be mindful of other regulatory requirements including a dental practitioners' capacity to possess, prescribe/supply and administer medications, perform radiographic procedures, treatment planning and referral. These requirements may vary across state and territory legislation.

8. What should you think about before providing dental treatment?

The dental **profession's** scope of practice covers the full range of activities and responsibilities which individuals within the profession are educated, trained and competent to perform; whereas the scope of the **individual's** practice within the division in which they are registered will vary from practitioner to practitioner and may be more specifically defined than the scope of the dental profession.

An individual's scope of practice is influenced by a number of factors, not just those set down by the Board in the registration standard and guidelines.

When assessing your own individual scope of practice you should ask yourself the following questions:

- 1. Am I practising within the requirements of the Board's registration standard?
- 2. Have I completed the necessary education and training?
- 3. Are there other legislative/regulatory frameworks that I need to consider?
 - (For example, other regulatory requirements that determine a dental practitioners' capacity to possess, prescribe/supply & administer medications, and perform radiographic procedures)
- 4. Does my professional indemnity insurance provide cover for the clinical procedure(s) being undertaken?
- 5. Does my workplace allow the practice? Does my employer have any additional specific requirements? (For example, supervision requirements, requirements for treatment planning and referral)
- 6. Have I undertaken the practice recently?
- 7. Do I feel confident to undertake the practice?

If you answered no or are unclear on any of these questions you should refer the patient to another dental practitioner educated, trained and competent to undertake the practice.

Dental hygienists, dental therapists, oral health therapists

9. How will the registration standard affect the practice of a dental hygienist, dental therapist or oral health therapists?

A dental hygienist, dental therapist or oral health therapist may only practice to the extent of their education, training and competence within a structured professional relationship with a dentist¹ and must not practise as independent practitioners.

Dental hygienists, dental therapists and oral health therapists are expected to refer to clinical team leaders when necessary. Where there is a structured professional relationship or referral relationship then the dentist is the clinical team leader.

10. Can a dental therapist or oral health therapist provide dental services to adults of all ages? All dental practitioners must work within the requirements of the registration standard and only perform those procedures for which they have been educated and trained in programs of study approved by the Board and in which they are competent.

The Board has supported and/or approved the following programs for dental therapists and oral health therapists to provide dental therapy in various modalities to adults of all ages:

- Dental Health Services Victoria (2007/08) bridging program to facilitate the provision of oral health care to adult patients
- ORH3ACP Advanced Clinical Practice as part of the Bachelor of Oral Health Science program at La Trobe University from 2010-2013
- ORH3ADT Adult Dental Therapy as part of the Bachelor of Oral Health Science program at La Trobe University from 2014 onwards, and
- Graduate Certificate in Dental Therapy Advanced Clinical Practice program at University of Melbourne from 2013 onwards.

Dental prosthetists

11. How will the registration standard affect the practice of a dental prosthetist?

Dental prosthetists work as independent practitioners in the assessment, treatment, management and provision of removable dentures; and flexible, removable mouthguards used for sporting activities.

Dental prosthetists who are educated and trained in a program of study approved by the Board and are competent to provide treatment for patients requiring implant retained overdentures must enter into a *structured professional relationship* with a dentist before providing such treatment.

Dental prosthetists may take impressions and records required for the manufacture of various types of splints; sleep apnoea/anti-snoring devices, immediate dentures and immediate additions to existing dentures. These procedures require *written referrals to and from dentists* and any appliance or device manufactured under such arrangement must be *planned*, *issued and managed by the treating dentist*.

Programs to extend scope

12. What are programs to extend scope?

Programs to extend scope cover a range of skills which allow dental practitioners to extend their education, training and competence in certain areas and *within the division in which they are registered*. They can extend a dental practitioner's scope of practice by undertaking educational programs that the Board has reviewed and approved.

The process of approval for these programs is under review by the Board. The current approved <u>add on programs</u> remain in force at this time.

¹ The term dentist refers to dentists, dental specialists and / or a group of dentists